

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known)

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this an amended filing

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Identify Yourself

#### About Debtor 1:

##### 1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**Glenn**

First name

**M**

Middle name

**Cygan**

Last name and Suffix (Sr., Jr., II, III)

#### About Debtor 2 (Spouse Only in a Joint Case):

**Debra**

First name

**A**

Middle name

**Cygan**

Last name and Suffix (Sr., Jr., II, III)

##### 2. All other names you have used in the last 8 years

Include your married or maiden names.

##### 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

**xxx-xx-8440**

**xxx-xx-3852**

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

**About Debtor 1:**

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

Include trade names and *doing business as* names

- I have not used any business name or EINs.

Business name(s)

EINs

**About Debtor 2 (Spouse Only in a Joint Case):**

- I have not used any business name or EINs.

Business name(s)

EINs

**5. Where you live**

**801 Inverness Road  
Lisle, IL 60532**

Number, Street, City, State & ZIP Code

**DuPage**

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

**If Debtor 2 lives at a different address:**

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

**Check one:**

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

**Check one:**

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

**Part 2: Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under** Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.
- Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13
8. **How you will pay the fee**  **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.  
 **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).  
 **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
9. **Have you filed for bankruptcy within the last 8 years?**  No.  
 Yes.
- District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**  No  
 Yes.
- Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_
11. **Do you rent your residence?**  No. Go to line 12.  
 Yes. Has your landlord obtained an eviction judgment against you?  
 No. Go to line 12.  
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

*Check the appropriate box to describe your business:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))  
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
 Stockbroker (as defined in 11 U.S.C. § 101(53A))  
 Commodity Broker (as defined in 11 U.S.C. § 101(6))  
 None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines.* If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

No.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Glenn M Cygan**  
 Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

**Incapacity.**

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.**

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.**

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

You must check one:

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

**Incapacity.**

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.**

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.**

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Glenn M Cygan**  
 Debtor 2 **Debra A Cygan**

Case number (if known)

**Part 6: Answer These Questions for Reporting Purposes**

<b>16. What kind of debts do you have?</b>	<b>16a.</b>	<b>Are your debts primarily consumer debts?</b> Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."		
	<input checked="" type="checkbox"/> No. Go to line 16b. <input type="checkbox"/> Yes. Go to line 17.			
	<b>16b.</b>	<b>Are your debts primarily business debts?</b> Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.		
	<input type="checkbox"/> No. Go to line 16c. <input checked="" type="checkbox"/> Yes. Go to line 17.			
	<b>16c.</b>	State the type of debts you owe that are not consumer debts or business debts		
<hr/>				
<b>17. Are you filing under Chapter 7?</b>	<input type="checkbox"/> No.	I am not filing under Chapter 7. Go to line 18.		
<b>Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?</b>	<input checked="" type="checkbox"/> Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?		
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>18. How many Creditors do you estimate that you owe?</b>	<input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000	
<b>19. How much do you estimate your assets to be worth?</b>	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion	
<b>20. How much do you estimate your liabilities to be?</b>	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion	

**Part 7: Sign Below**

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Glenn M Cygan

**Glenn M Cygan**

Signature of Debtor 1

/s/ Debra A Cygan

**Debra A Cygan**

Signature of Debtor 2

Executed on August 14, 2018  
 MM / DD / YYYY

Executed on August 14, 2018  
 MM / DD / YYYY

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**/s/ Douglas W. Worrell**

Signature of Attorney for Debtor

Date

**August 14, 2018**

MM / DD / YYYY

**Douglas W. Worrell**

Printed name

**Law office of Douglas Worrell, Ltd.**

Firm name

**1625 W. Colonial Parkway**

**Inverness, IL 60067**

Number, Street, City, State & ZIP Code

Contact phone

**847-241-2074**

Email address

**bk@thelawoffice.us**

**3124416 IL**

Bar number & State

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	<b>Debra A Cygan</b>		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

		<b>Your assets</b> Value of what you own
1.	<b>Schedule A/B: Property</b> (Official Form 106A/B)	\$ <b>220,000.00</b>
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ <b>220,000.00</b>
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ <b>37,271.36</b>
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ <b>257,271.36</b>

#### Part 2: Summarize Your Liabilities

		<b>Your liabilities</b> Amount you owe
2.	<b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)	\$ <b>298,235.00</b>
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ <b>298,235.00</b>
3.	<b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)	\$ <b>0.00</b>
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$ <b>0.00</b>
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	\$ <b>703,783.40</b>
		<b>Your total liabilities</b> \$ <b>1,002,018.40</b>

#### Part 3: Summarize Your Income and Expenses

4.	<b>Schedule I: Your Income</b> (Official Form 106I)	\$ <b>4,732.44</b>
	Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$ <b>4,732.44</b>
5.	<b>Schedule J: Your Expenses</b> (Official Form 106J)	\$ <b>4,704.00</b>
	Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$ <b>4,704.00</b>

#### Part 4: Answer These Questions for Administrative and Statistical Records

##### 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

##### 7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ _____
----------

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>56,066.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <u>0.00</u>
<b>9g. Total.</b> Add lines 9a through 9f.	\$ <u>56,066.00</u>

Fill in this information to identify your case and this filing:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra A Cygan</b>		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number			

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1

#### 801 Inverness Road

Street address, if available, or other description

Lisle IL 60532-0000  
City State ZIP Code

#### DuPage

County

##### What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$220,000.00

Current value of the portion you own?

\$220,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Tenants By The Entirety

Check if this is community property (see instructions)

##### Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

single family house

##### 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$220,000.00

#### Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

- No  
 Yes

3.1 Make: **Honda**  
 Model: **CRV sport EX-L**  
 Year: **2008**  
 Approximate mileage: **154000**  
 Other information:  
 \_\_\_\_\_

**Who has an interest in the property?** Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
  
 **Check if this is community property**  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?** **Current value of the portion you own?**

**\$4,000.00** **\$4,000.00**

3.2 Make: **RAM**  
 Model: **1500**  
 Year: **2013**  
 Approximate mileage: **94000**  
 Other information:  
 \_\_\_\_\_

**Who has an interest in the property?** Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
  
 **Check if this is community property**  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?** **Current value of the portion you own?**

**\$14,000.00** **\$14,000.00**

3.3 Make: **Honda**  
 Model: **Civic**  
 Year: **2012**  
 Approximate mileage: **37000**  
 Other information:  
 \_\_\_\_\_

**Who has an interest in the property?** Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
  
 **Check if this is community property**  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?** **Current value of the portion you own?**

**\$8,500.00** **\$8,500.00**

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

**\$26,500.00**

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- No  
 Yes. Describe.....

**Misc well used household goods and furnishings.**

**\$2,800.00**

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

**7. Electronics**

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

Yes. Describe.....

**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe.....

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

Misc clothes

\$200.00

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

Engagement ring - cloudy clarity

\$550.00

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

No

Yes. Describe.....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

No

Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....**

\$3,550.00

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes.....

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

**Cash** **\$40.00****17. Deposits of money**

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

 No Yes.....

Institution name:

17.1. <b>Checking</b>	<b>5th 3rd</b>	<b>\$108.79</b>
17.2. <b>Savings</b>	<b>5th 3rd bank</b>	<b>\$109.79</b>
17.3. <b>Checking</b>	<b>TCF</b>	<b>\$178.49</b>
17.4. <b>Savings</b>	<b>TCF</b>	<b>\$103.45</b>
17.5. <b>Savings</b>	<b>US Bank</b>	<b>\$1,954.00</b>
17.6. <b>Checking</b>	<b>US Bank</b>	<b>\$147.93</b>
17.7. <b>Savings</b>	<b>US Bank</b>	<b>\$422.49</b>
17.8. <b>Certificate of Deposit</b>	<b>5th 3rd bank CD that secures credit card. \$1,200 with card balance of \$448.58</b>	<b>\$751.42</b>

**18. Bonds, mutual funds, or publicly traded stocks**

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

 No Yes.....

Institution or issuer name:

19. <b>Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture</b>	<b>Memories In The Making Inc.</b>	<b>100</b>	<b>%</b>	<b>\$2,373.00</b>
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**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

 No Yes. Give specific information about them.....

Issuer name:

% of ownership:

**21. Retirement or pension accounts**

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

 No Yes. List each account separately.

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

Type of account: Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes. ....

Institution name or individual:

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description.

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them...

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Illinois tax refund

\$750.00

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information.....

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information..

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Debtor 1  
Debtor 2Glenn M Cygan  
Debra A Cygan

Case number (if known)

<u>State Farm policies on son and 1 daughter. 2 whole live policies. Too new to have cash value.</u>	<u>Debtors</u>	<u>\$0.00</u>
<u>State Farm term policy</u>	<u>Debra, wife</u>	<u>\$0.00</u>
<u>State farm policy on daughter. Policy loan \$527. Net cash value \$144.</u>	<u>Debtors</u>	<u>\$144.00</u>
<u>State Farm Univeral Life \$17,814 policy loans with net cash value of \$138.00</u>	<u>Debra, wife</u>	<u>\$138.00</u>
<u>State Farm term policy - no cash value</u>	<u>Glenn, husband</u>	<u>\$0.00</u>
<u>West Coast Term Policy</u>	<u>Debra, wife</u>	<u>\$0.00</u>
<u>Farmers Insurance term policy no cash value</u>	<u>Glenn, husband</u>	<u>\$0.00</u>

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- No  
 Yes. Give specific information..

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- No  
 Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- No  
 Yes. Describe each claim.....

**35. Any financial assets you did not already list**

- No  
 Yes. Give specific information..

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

\$7,221.36

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**

- No. Go to Part 6.  
 Yes. Go to line 38.

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- No. Go to Part 7.

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

 Yes. Go to line 47.**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

 No Yes. Give specific information.....**54. Add the dollar value of all of your entries from Part 7. Write that number here .....**

\$0.00

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2 .....	\$220,000.00
56. Part 2: Total vehicles, line 5	\$26,500.00
57. Part 3: Total personal and household items, line 15	\$3,550.00
58. Part 4: Total financial assets, line 36	\$7,221.36
59. Part 5: Total business-related property, line 45	\$0.00
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00
61. Part 7: Total other property not listed, line 54	\$0.00
+	
62. Total personal property. Add lines 56 through 61...	\$37,271.36
	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$257,271.36

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra A Cygan</b>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption.	
<b>2008 Honda CRV sport EX-L 154000 miles</b> Line from <i>Schedule A/B</i> : 3.1	<b>\$4,000.00</b>	<input checked="" type="checkbox"/> \$4,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(c)</b>
<b>2012 Honda Civic 37000 miles</b> Line from <i>Schedule A/B</i> : 3.3	<b>\$8,500.00</b>	<input checked="" type="checkbox"/> \$656.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Misc well used household goods and furnishings.</b> Line from <i>Schedule A/B</i> : 6.1	<b>\$2,800.00</b>	<input checked="" type="checkbox"/> \$260.64 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Misc clothes</b> Line from <i>Schedule A/B</i> : 11.1	<b>\$200.00</b>	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(a)</b>
<b>Engagement ring - cloudy clarity</b> Line from <i>Schedule A/B</i> : 12.1	<b>\$550.00</b>	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(a)</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
<b>Cash</b> Line from Schedule A/B: 16.1	<u>\$40.00</u>	<input checked="" type="checkbox"/> <b>\$40.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Checking: 5th 3rd</b> Line from Schedule A/B: 17.1	<u>\$108.79</u>	<input checked="" type="checkbox"/> <b>\$108.79</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Savings: 5th 3rd bank</b> Line from Schedule A/B: 17.2	<u>\$109.79</u>	<input checked="" type="checkbox"/> <b>\$109.79</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Checking: TCF</b> Line from Schedule A/B: 17.3	<u>\$178.49</u>	<input checked="" type="checkbox"/> <b>\$178.49</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Savings: TCF</b> Line from Schedule A/B: 17.4	<u>\$103.45</u>	<input checked="" type="checkbox"/> <b>\$103.45</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Savings: US Bank</b> Line from Schedule A/B: 17.5	<u>\$1,954.00</u>	<input checked="" type="checkbox"/> <b>\$1,954.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Checking: US Bank</b> Line from Schedule A/B: 17.6	<u>\$147.93</u>	<input checked="" type="checkbox"/> <b>\$147.93</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Savings: US Bank</b> Line from Schedule A/B: 17.7	<u>\$422.49</u>	<input checked="" type="checkbox"/> <b>\$422.49</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Certificate of Deposit: 5th 3rd bank</b> <b>CD that secures credit card. \$1,200 with card balance of \$448.58</b> Line from Schedule A/B: 17.8	<u>\$751.42</u>	<input checked="" type="checkbox"/> <b>\$751.42</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Memories In The Making Inc.</b> <b>100 % ownership</b> Line from Schedule A/B: 19.1	<u>\$2,373.00</u>	<input checked="" type="checkbox"/> <b>\$2,373.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>Illinois tax refund</b> Line from Schedule A/B: 28.1	<u>\$750.00</u>	<input checked="" type="checkbox"/> <b>\$750.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own  Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim  <i>Check only one box for each exemption.</i>	Specific laws that allow exemption
<b>State Farm term policy</b> <b>Beneficiary: Debra, wife</b> Line from <i>Schedule A/B</i> : 31.2	<b>\$0.00</b>	<input checked="" type="checkbox"/> <b>100%</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(f)</b>
<b>State farm policy on daughter.</b> <b>Policy loan \$527. Net cash value \$144.</b> <b>Beneficiary: Debtors</b> Line from <i>Schedule A/B</i> : 31.3	<b>\$144.00</b>	<input checked="" type="checkbox"/> <b>\$144.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(b)</b>
<b>State Farm Univeral Life \$17,814 policy loans with net cash value of \$138.00</b> <b>Beneficiary: Debra, wife</b> Line from <i>Schedule A/B</i> : 31.4	<b>\$138.00</b>	<input checked="" type="checkbox"/> <b>100%</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(f)</b>
<b>State Farm term policy - no cash value</b> <b>Beneficiary: Glenn, husband</b> Line from <i>Schedule A/B</i> : 31.5	<b>\$0.00</b>	<input checked="" type="checkbox"/> <b>100%</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(f)</b>
<b>West Coast Term Policy</b> <b>Beneficiary: Debra, wife</b> Line from <i>Schedule A/B</i> : 31.6	<b>\$0.00</b>	<input checked="" type="checkbox"/> <b>100%</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(f)</b>
<b>Farmers Insurance term policy no cash value</b> <b>Beneficiary: Glenn, husband</b> Line from <i>Schedule A/B</i> : 31.7	<b>\$0.00</b>	<input checked="" type="checkbox"/> <b>100%</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>735 ILCS 5/12-1001(f)</b>

**3. Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

 No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra A Cygan</b>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
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2.1	<b>A. Alliance Collection Agency, Inc.</b>  Creditor's Name  <b>4180 RFD Route 83 Suite 208 Lake Zurich, IL 60047-9582</b>  Number, Street, City, State & Zip Code	Describe the property that secures the claim:  <b>2012 Honda Civic 37000 miles</b>	\$7,844.00	\$8,500.00	\$0.00
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Who owes the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed  
**Nature of lien.** Check all that apply.  
 An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Date debt was incurred **Opened 09/14 Last Active 5/10/18**

Last 4 digits of account number \_\_\_\_\_

2.2	<b>Ally Financial</b>  Creditor's Name  <b>Attn: Bankruptcy Dept Po Box 380901 Bloomington, MN 55438</b>  Number, Street, City, State & Zip Code	Describe the property that secures the claim:  <b>2013 RAM 1500 94000 miles</b>	\$22,465.00	\$14,000.00	\$8,465.00
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Who owes the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed  
**Nature of lien.** Check all that apply.  
 An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit

Debtor 1 <b>Glenn M Cygan</b>	First Name _____	Middle Name _____	Last Name _____	Case number (if known) _____
Debtor 2 <b>Debra A Cygan</b>	First Name _____	Middle Name _____	Last Name _____	
<input type="checkbox"/> Check if this claim relates to a community debt	<input type="checkbox"/> Other (including a right to offset) _____			
<b>Opened 06/17 Last Active</b>				
Date debt was incurred <b>5/21/18</b>	Last 4 digits of account number <b>9614</b>			

2.3 <b>Fifth Third Bank</b> Creditor's Name  <b>Attn: Bankruptch Department 1830 E Paris Ave Se Grand Rapids, MI 49546</b> Number, Street, City, State & Zip Code	Describe the property that secures the claim: <b>Credit Line Secured by \$1,200 CD</b>	\$630.00	<b>Unknown</b>	<b>Unknown</b>
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>				
<p><b>Who owes the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p>				

Opened 05/17 Last Active	Date debt was incurred <b>5/11/18</b>	Last 4 digits of account number <b>7762</b>		
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2.4 <b>PNC Mortgage</b> Creditor's Name  <b>Attn: Bankruptcy 3232 Newmark Drive Miamisburg, OH 45342</b> Number, Street, City, State & Zip Code	Describe the property that secures the claim: <b>801 Inverness Road Lisle, IL 60532 DuPage County single family house</b>	\$267,296.00	\$220,000.00	\$47,296.00
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Nature of lien.</b> Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)  <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)  <input type="checkbox"/> Judgment lien from a lawsuit  <input type="checkbox"/> Other (including a right to offset) _____</p>				
<p><b>Who owes the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p>				

Opened 11/12 Last Active	Date debt was incurred <b>5/27/17</b>	Last 4 digits of account number <b>6215</b>		
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Add the dollar value of your entries in Column A on this page. Write that number here:  
If this is the last page of your form, add the dollar value totals from all pages.  
Write that number here:

<b>\$298,235.00</b>
<b>\$298,235.00</b>

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is

Debtor 1 **Glenn M Cygan**

First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

Debtor 2 **Debra A Cygan**

First Name Middle Name Last Name

trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Name, Number, Street, City, State & Zip Code

**Honda Financial Services**  
**P.O. Box 5308**  
**Elgin, IL 60121-5308**

On which line in Part 1 did you enter the creditor? 2.1

Last 4 digits of account number 0923

Name, Number, Street, City, State & Zip Code

**PNC Bank**  
**Attn: BK Dept**  
**P.O. Box 1820**  
**Dayton, OH 45401-1820**

On which line in Part 1 did you enter the creditor? 2.4

Last 4 digits of account number 6215

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra A Cygan</b>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

#### Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim	
4.1	A Bella Baby OBGYN Nonpriority Creditor's Name 4333 Main St. Downers Grove, IL 60515 Number Street City State Zip Code  Who incurred the debt? Check one.  <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt  Is the claim subject to offset?  <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>G724</b>  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim:  <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	<b>\$250.00</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

<b>4.2</b>	<p><b>Alfac</b>            Nonpriority Creditor's Name  <b>1932 Wynnton Road</b>  <b>Columbus, GA 31999-0001</b>            Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> Disputed</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Other. Specify _____</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____ <b>\$419.16</b></p> <p>When was the debt incurred? <b>2017</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><b>Business debt - debtor may have personal liability.</b></p>
<b>4.3</b>	<p><b>American Enterprise Bank</b>            Nonpriority Creditor's Name  <b>275 S. Roselle Road</b>  <b>Schaumburg, IL 60193</b>            Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> Disputed</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Other. Specify _____</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____ <b>\$118,049.43</b></p> <p>When was the debt incurred? <b>2016</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><b>Business debt - debtor may have personal liability.</b></p>
<b>4.4</b>	<p><b>AMEX</b>            Nonpriority Creditor's Name  <b>PO Box 299051</b>  <b>Fort Lauderdale, FL 33329-9051</b>            Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> Disputed</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Other. Specify _____</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____ <b>\$38.84</b></p> <p>When was the debt incurred? <b>2017</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><b>Business debt - debtor may have personal liability.</b></p>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

<b>4.5</b>	<b>AT&amp;T</b> Nonpriority Creditor's Name <b>P.O. Box 10330</b> <b>Fort Wayne, IN 46851-0330</b> Number Street City State Zip Code	<b>Last 4 digits of account number</b> <u>5100</u>	<b>\$2,110.02</b>
<b>When was the debt incurred?</b> _____			
<b>As of the date you file, the claim is:</b> Check all that apply			
<b>Who incurred the debt?</b> Check one.			
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only			
<input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> <b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
<b>Type of NONPRIORITY unsecured claim:</b>			
<input type="checkbox"/> Contingent			
<input type="checkbox"/> Unliquidated			
<input type="checkbox"/> Disputed			
<b>Type of NONPRIORITY unsecured claim:</b>			
<input type="checkbox"/> Student loans			
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
<input checked="" type="checkbox"/> Other. Specify _____			
<b>4.6</b>	<b>AT&amp;T</b> Nonpriority Creditor's Name <b>PO Box 5080</b> <b>Carol Stream, IL 60197-5080</b> Number Street City State Zip Code	<b>Last 4 digits of account number</b> _____	<b>\$353.23</b>
<b>When was the debt incurred?</b> <u>2017</u>			
<b>As of the date you file, the claim is:</b> Check all that apply			
<b>Who incurred the debt?</b> Check one.			
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input checked="" type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> <b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
<b>Type of NONPRIORITY unsecured claim:</b>			
<input type="checkbox"/> Student loans			
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
<b>Business debt - debtor may have personal liability.</b>			
<b>4.7</b>	<b>AT&amp;T Mobility</b> Nonpriority Creditor's Name <b>PO Box 6463</b> <b>Carol Stream, IL 60197-6463</b> Number Street City State Zip Code	<b>Last 4 digits of account number</b> _____	<b>\$84.28</b>
<b>When was the debt incurred?</b> <u>2017</u>			
<b>As of the date you file, the claim is:</b> Check all that apply			
<b>Who incurred the debt?</b> Check one.			
<input type="checkbox"/> Debtor 1 only			
<input type="checkbox"/> Debtor 2 only			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			
<input checked="" type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> <b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			
<b>Type of NONPRIORITY unsecured claim:</b>			
<input type="checkbox"/> Student loans			
<input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
<input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
<b>Business debt - debtor may have personal liability.</b>			

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.8	<b>Aurora Diagnostics</b> Nonpriority Creditor's Name <b>Pinkus Dermatopathology</b> <b>Laboratory</b> <b>16344 Collection Ctr Dr.</b> <b>Chicago, IL 60693-0163</b> Number Street City State Zip Code	Last 4 digits of account number <b>6475</b>	\$115.00
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	When was the debt incurred? _____	
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>	
4.9	<b>Best Buy Credit Services</b> Nonpriority Creditor's Name <b>P.O. Box 790441</b> <b>St. Louis, MO 63179</b> Number Street City State Zip Code	Last 4 digits of account number <b>8321</b>	\$2,890.70
	<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	When was the debt incurred? <b>Opened 02/12 Last Active 8/04/17</b>	
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b>	
4.1 0	<b>BP/SYNCB</b> Nonpriority Creditor's Name <b>PO Box 530942</b> <b>Atlanta, GA 30353-0942</b> Number Street City State Zip Code	Last 4 digits of account number <b>6527</b>	\$1,005.74
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	When was the debt incurred? _____	
	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>As of the date you file, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.1 1	<p><b>Capital One</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 30285</b> <b>Salt Lake City, UT 84130-0285</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>6695</b></p> <p>When was the debt incurred? <b>Opened 03/14 Last Active 8/05/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$6,597.81</b>
4.1 2	<p><b>Capital One</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 30285</b> <b>Salt Lake City, UT 84130-0285</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>9420</b></p> <p>When was the debt incurred? <b>Opened 05/07 Last Active 7/11/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$1,247.36</b>
4.1 3	<p><b>Capital One Na</b> Nonpriority Creditor's Name <b>Attn: General Correspondence/BK</b> <b>PO Box 30285</b> <b>Salt Lake City, UT 84130</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>0633</b></p> <p>When was the debt incurred? <b>Opened 11/09 Last Active 9/22/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$1,898.06</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.1 4	<p><b>Capital One/Helzberg</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 30257</b> <b>Salt Lake City, UT 84130-0257</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>8998</b></p> <p>When was the debt incurred? <b>Opened 3/03/16 Last Active 7/27/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$2,089.55</b>
4.1 5	<p><b>Chase</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>Po Box 100018</b> <b>Kennesaw, GA 30156</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? <b>2017</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><b>Business debt - debtor may have personal liability.</b></p>	<b>Unknown</b>
4.1 6	<p><b>Citibank/Best Buy</b> Nonpriority Creditor's Name <b>Centralized Bankruptcy</b> <b>Po Box 790034</b> <b>St Louis, MO 63179</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>7292</b></p> <p>When was the debt incurred? <b>Opened 12/16 Last Active 5/22/18</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$2,553.62</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

<b>4.1 7</b>	<p><b>Citibank/The Home Depot</b> Nonpriority Creditor's Name <b>Centralized Bankruptcy</b> <b>Po Box 790034</b> <b>St. Louis, MO 63179</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>0823</b></p> <p>When was the debt incurred? <b>Opened 05/13 Last Active 6/06/18</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$379.00</b>
<b>4.1 8</b>	<p><b>Comenity Bank/Meijer</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 182273</b> <b>Columbus, OH 43218-2273</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>9322</b></p> <p>When was the debt incurred? <b>Opened 12/12 Last Active 10/14/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$1,022.51</b>
<b>4.1 9</b>	<p><b>Comenity Bank/Sports Authority</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>Po Box 182125</b> <b>Columbus, OH 43218-2125</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>7014</b></p> <p>When was the debt incurred? <b>Opened 12/15 Last Active 5/04/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$1,660.00</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

<b>4.2 0</b>	<p><b>Comenity Bank/Ulta Beauty</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>Po Box 182125</b> <b>Columbus, OH 43218</b> Number Street City State Zip Code Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>3686</b></p> <p>When was the debt incurred? <b>Opened 11/16 Last Active 7/29/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$1,126.00</b>
<b>4.2 1</b>	<p><b>Comenity Bank/Victoria Secret</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>P.O. Box 182125</b> <b>Columbus, OH 45318-2125</b> Number Street City State Zip Code Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input checked="" type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>8312</b></p> <p>When was the debt incurred? <b>Opened 06/14 Last Active 7/21/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$1,957.28</b>
<b>4.2 2</b>	<p><b>Comenity Capital/Forever 21</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>P.O. Box 183043</b> <b>Columbus, OH 43218-3043</b> Number Street City State Zip Code Who incurred the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input checked="" type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>2122</b></p> <p>When was the debt incurred? <b>Opened 02/17 Last Active 7/28/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$881.94</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

4.2 3	<p><b>Costco Go Anywhere Citicard</b> Nonpriority Creditor's Name <b>Citicorp Credit Svcs/Centralized BK</b> <b>P.O. Box 790040</b> <b>St. Louis, MO 64195</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>6223</b></p> <p>When was the debt incurred? <b>Opened 07/16 Last Active 7/27/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$6,168.65</b>
4.2 4	<p><b>Country Financial</b> Nonpriority Creditor's Name <b>PO Box 2100</b> <b>Bloomington, IL 61702-2100</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? <b>2017</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><b>Business debt - debtor may have personal liability.</b></p>	<b>\$148.64</b>
4.2 5	<p><b>Credit One Bank</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 98873</b> <b>Las Vegas, NV 89193-8873</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>6076</b></p> <p>When was the debt incurred? <b>Opened 02/17 Last Active 5/10/18</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$236.92</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

4.2 6	<p><b>Credit One Bank</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 98873</b> <b>Las Vegas, NV 89193-8873</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>8204</b></p> <p>When was the debt incurred? <b>Opened 05/17 Last Active 5/08/18</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$196.00</b>
4.2 7	<p><b>Credit One Bank</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 98873</b> <b>Las Vegas, NV 89193-8873</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>6736</b></p> <p>When was the debt incurred? <b>Opened 02/16 Last Active 5/02/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$1,174.05</b>
4.2 8	<p><b>Darling Ingredients, Inc.</b> Nonpriority Creditor's Name <b>PO Box 552210</b> <b>Detroit, MI 48255-2210</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? <b>2017</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><b>Business debt - debtor may have personal liability.</b></p> <p><input checked="" type="checkbox"/> Other. Specify <b>Business debt - debtor may have personal liability.</b></p>	<b>\$145.00</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.2 9	<p><b>Discover Financial</b> Nonpriority Creditor's Name</p> <p><b>P.O. Box 3025</b> <b>New Albany, OH 43054</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>4929</b></p> <p>When was the debt incurred? <b>Opened 12/16 Last Active 5/16/18</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$484.00</b>
4.3 0	<p><b>Easypay/dvra</b> Nonpriority Creditor's Name</p> <p><b>Attn: Bankruptcy</b> <b>Po Box 2549</b> <b>Carlsbad, CA 92018</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>A478</b></p> <p>When was the debt incurred? <b>Opened 7/12/17 Last Active 7/12/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Installment Sales Contract</b></p>	<b>\$500.00</b>
4.3 1	<p><b>Easypay/dvra</b> Nonpriority Creditor's Name</p> <p><b>Attn: Bankruptcy</b> <b>P.O. Box 2549</b> <b>Carlsbad, CA 92018</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>A479</b></p> <p>When was the debt incurred? <b>Opened 7/12/17 Last Active 8/18/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Installment Sales Contract</b></p>	<b>\$466.66</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.3  
2

<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attention: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b>	Last 4 digits of account number <b>0003</b>	\$14,500.00
Number Street City State Zip Code	When was the debt incurred? <b>Opened 09/12 Last Active 5/31/18</b>	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset?	<b>Type of NONPRIORITY unsecured claim:</b> <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Educational**

4.3  
3

<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attention: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b>	Last 4 digits of account number <b>0002</b>	\$8,726.00
Number Street City State Zip Code	When was the debt incurred? <b>Opened 10/11 Last Active 5/31/18</b>	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset?	<b>Type of NONPRIORITY unsecured claim:</b> <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Educational**

4.3  
4

<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attention: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b>	Last 4 digits of account number <b>0005</b>	\$6,988.00
Number Street City State Zip Code	When was the debt incurred? <b>Opened 09/13 Last Active 5/31/18</b>	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset?	<b>Type of NONPRIORITY unsecured claim:</b> <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Educational**

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.3  
5

<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attention: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b> Number Street City State Zip Code	Last 4 digits of account number <b>0007</b>	\$6,897.00
<b>Who incurred the debt?</b> Check one.	<b>When was the debt incurred?</b> <b>Opened 09/14 Last Active 5/31/18</b>	
<b>As of the date you file, the claim is:</b> Check all that apply		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

**Educational**

4.3  
6

<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Po Box 60610</b> <b>Harrisburg, PA 17106</b> Number Street City State Zip Code	Last 4 digits of account number <b>0004</b>	\$4,715.00
<b>Who incurred the debt?</b> Check one.	<b>When was the debt incurred?</b> <b>Opened 09/13 Last Active 5/31/18</b>	
<b>As of the date you file, the claim is:</b> Check all that apply		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

**Educational**

4.3  
7

<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attention: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b> Number Street City State Zip Code	Last 4 digits of account number <b>0006</b>	\$4,652.00
<b>Who incurred the debt?</b> Check one.	<b>When was the debt incurred?</b> <b>Opened 09/14 Last Active 5/31/18</b>	
<b>As of the date you file, the claim is:</b> Check all that apply		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____		

**Educational**

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.3  
8

<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attention: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b>	Last 4 digits of account number <b>0001</b>	\$3,586.00
Number Street City State Zip Code	When was the debt incurred? <b>Opened 10/11 Last Active</b> <b>5/31/18</b>	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset?	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Educational**

4.3  
9

<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attention: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b>	Last 4 digits of account number <b>0008</b>	\$1,417.00
Number Street City State Zip Code	When was the debt incurred? <b>Opened 10/15 Last Active</b> <b>5/31/18</b>	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset?	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Educational**

4.4  
0

<b>FedLoan Servicing</b> Nonpriority Creditor's Name <b>Attention: Bankruptcy</b> <b>Po Box 69184</b> <b>Harrisburg, PA 17106</b>	Last 4 digits of account number <b>0009</b>	\$735.00
Number Street City State Zip Code	When was the debt incurred? <b>Opened 10/15 Last Active</b> <b>5/31/18</b>	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Is the claim subject to offset?	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Educational**

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.4  
1**Fifth Third Bank**

Nonpriority Creditor's Name

**Customer Service MD 1MOC2G  
5050 Kingsley Dr.  
Cincinnati, OH 45227-1115**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
**Is the claim subject to offset?**  
 No  
 Yes

Last 4 digits of account number

**7762****\$749.88**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.4  
2**First Bankcard**

Nonpriority Creditor's Name

**P.O. Box 3331  
Omaha, NE 68103-0331**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
**Is the claim subject to offset?**  
 No  
 Yes

Last 4 digits of account number

**9188****\$2,689.26**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Credit Card**

4.4  
3**First National Bank**

Nonpriority Creditor's Name

**Attn: Tina  
1620 Dodge St Mailstop 4440  
Omaha, NE 68197**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
**Is the claim subject to offset?**  
 No  
 Yes

Last 4 digits of account number

**5201****\$3,265.00****Opened 12/15 Last Active****7/17/17**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Credit Card**

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.4 4	<b>First Premier Bank</b> Nonpriority Creditor's Name  <b>Po Box 5524</b> <b>Sioux Falls, SD 57117</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>4506</b> When was the debt incurred? <b>Opened 06/06 Last Active 9/04/15</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$521.00</b>
4.5	<b>General Revenue Corp</b> Nonpriority Creditor's Name  <b>4660 Duke Drive</b> <b>Mason, OH 45040</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>6977</b> When was the debt incurred? <b>Opened 8/13/16 Last Active 1/19/17</b> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Collection Attorney Benedictine University</b>	<b>\$0.00</b>
4.6	<b>GTE Communications, Inc.</b> Nonpriority Creditor's Name <b>PO Box 842630</b> <b>Dallas, TX 75284-2630</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? <b>2017</b> As of the date you file, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Business debt - debtor may have personal liability.</b>	<b>\$679.94</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

4.4 7	<b>Joseph J. Bracken</b> Nonpriority Creditor's Name <b>5290 Westview Lane</b> <b>Lisle, IL 60532-2420</b> Number Street City State Zip Code	Last 4 digits of account number _____ <b>2017</b> <b>As of the date you file, the claim is:</b> Check all that apply	<b>Unknown</b>
	<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		<b>Business Venture</b> <input checked="" type="checkbox"/> Other. Specify <b>Joe Zac, Inc.</b>	
4.4 8	<b>Kohls/Capital One</b> Nonpriority Creditor's Name <b>Kohls Credit</b> <b>Po Box 3120</b> <b>Milwaukee, WI 53201</b> Number Street City State Zip Code	Last 4 digits of account number <b>1494</b> <b>Opened 11/02/09 Last Active 2/19/16</b> <b>As of the date you file, the claim is:</b> Check all that apply	<b>\$943.00</b>
	<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		<input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b>	
4.4 9	<b>LVNV Funding/Resurgent Capital</b> Nonpriority Creditor's Name <b>Po Box 10497</b> <b>Greenville, SC 29603</b> Number Street City State Zip Code	Last 4 digits of account number <b>6736</b> <b>Opened 01/18</b> <b>As of the date you file, the claim is:</b> Check all that apply	<b>\$1,174.00</b>
	<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b> <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	
		<b>Factoring Company Account Credit One</b> <input checked="" type="checkbox"/> Other. Specify <b>Bank N.A.</b>	

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.5 0	<p><b>Macy's/Visa Dept Store Natl Bank</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 8066</b> <b>Mason, OH 45040</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>4850</b></p> <p>When was the debt incurred? <b>Opened 05/12 Last Active 8/14/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$2,560.72</b>
4.5 1	<p><b>Maple Terrace Management LP</b> Nonpriority Creditor's Name <b>707 Skokie Blvd, Ste 100</b> <b>Northbrook, IL 60062</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number</p> <p>When was the debt incurred? <b>2017</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Business Lease default</b></p>	<b>\$410,071.00</b>
4.5 2	<p><b>MB Financial Bank</b> Nonpriority Creditor's Name <b>Mb Financial Bank/Attn Bankruptcy</b> <b>6111 N River Rd 9th Floor</b> <b>Rosemont, IL 60018</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>9311</b></p> <p>When was the debt incurred? <b>Opened 09/16 Last Active 4/20/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Installment Loan</b></p>	<b>\$2,727.00</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

4.5 3	<p><b>Merrick Bank/CardWorks</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 9201</b> <b>Old Bethpage, NY 11804</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>6590</b></p> <p>When was the debt incurred? <b>Opened 11/16 Last Active 7/21/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims      <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$1,799.00</b>
4.5 4	<p><b>Merrick Bank/CardWorks</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 9201</b> <b>Old Bethpage, NY 11804</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input checked="" type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>2650</b></p> <p>When was the debt incurred? <b>Opened 02/17 Last Active 9/22/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims      <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b></p>	<b>\$1,042.00</b>
4.5 5	<p><b>Michael J. Gonda, DDS</b> Nonpriority Creditor's Name <b>4746 Main St.</b> <b>Lisle, IL 60532-1724</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Debtor 2 only      <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>9671</b></p> <p>When was the debt incurred?</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims      <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Medical</b></p>	<b>\$778.00</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

4.5 6	<p><b>Papa John's</b> Nonpriority Creditor's Name <b>1008 Solutions Center</b> <b>Dept. 771108</b> <b>Chicago, IL 60677-1001</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____ <b>\$10,189.92</b></p> <p>When was the debt incurred? <b>2017</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><b>Business debt - debtor may have personal liability.</b></p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>
4.5 7	<p><b>Pointe Pest Control</b> Nonpriority Creditor's Name <b>1275 W. Roosevelt Rd., Suite 106</b> <b>West Chicago, IL 60185</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>7017</b> <b>\$115.00</b></p> <p>When was the debt incurred? _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><b>Business debt - debtor may have personal liability.</b></p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>
4.5 8	<p><b>Precision Heating &amp; Cooling</b> Nonpriority Creditor's Name <b>12004 S. Central Ave</b> <b>Alsip, IL 60803</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____ <b>\$7,150.00</b></p> <p>When was the debt incurred? <b>2017</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><b>Business debt - debtor may have personal liability.</b></p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

4.5 9	<b>Republic Services</b> Nonpriority Creditor's Name <b>5050 W. Lake Street</b> <b>Melrose Park, IL 60160-2776</b> Number Street City State Zip Code	Last 4 digits of account number _____	<b>\$590.39</b>
		When was the debt incurred? <b>2017</b>	
		As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	<b>Business debt - debtor may have personal liability.</b> <input checked="" type="checkbox"/> Other. Specify <b>Medical</b>
4.6 0	<b>Robert F. Girgis, DDS</b> Nonpriority Creditor's Name <b>7350 Janes Ave.</b> <b>Woodridge, IL 60517-2339</b> Number Street City State Zip Code	Last 4 digits of account number _____	<b>\$1,102.50</b>
		When was the debt incurred? _____	
		As of the date you file, the claim is: Check all that apply	
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	<input checked="" type="checkbox"/> Other. Specify <b>Medical</b>
4.6 1	<b>Sams Club/Synchrony Bank</b> Nonpriority Creditor's Name <b>P.O. Box 965005</b> <b>Orlando, FL 32896-5060</b> Number Street City State Zip Code	Last 4 digits of account number <b>9593</b>	<b>\$4,710.66</b>
		When was the debt incurred? <b>Opened 08/12 Last Active 7/23/17</b>	
		As of the date you file, the claim is: Check all that apply	
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts	<input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.6 2	<p><b>Sams Club/Synchrony Bank</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept. P.O. Box 965060 Orlando, FL 32896-5060</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another      <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt      <input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Is the claim subject to offset?      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Yes      <input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<p><b>Last 4 digits of account number</b> <u>2367</u>      <b>\$1,869.53</b></p> <p><b>When was the debt incurred?</b> <u>Opened 04/16 Last Active 5/11/18</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p>
4.6 3	<p><b>Syncb/PLCC</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Po Box 965060 Orlando, FL 32896</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another      <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt      <input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Is the claim subject to offset?      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Yes      <input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<p><b>Last 4 digits of account number</b> <u>6527</u>      <b>\$965.00</b></p> <p><b>When was the debt incurred?</b> <u>Opened 12/15 Last Active 6/05/18</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p>
4.6 4	<p><b>Syncb/syncb</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Po Box 965060 Orlando, FL 32896</b> Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another      <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt      <input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Is the claim subject to offset?      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input type="checkbox"/> Yes      <input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<p><b>Last 4 digits of account number</b> <u>2777</u>      <b>\$0.00</b></p> <p><b>When was the debt incurred?</b> <u>Opened 4/26/13 Last Active 5/15/14</u></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.6 5	<p><b>Synchrony Bank/ JC Penneys</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>P.O. Box 965060</b> <b>Orlando, FL 32896</b></p> <p>Number Street City State Zip Code <b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input checked="" type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>7017</b></p> <p>When was the debt incurred? <b>Opened 05/15 Last Active 9/27/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$1,038.00</b>
4.6 6	<p><b>Synchrony Bank/ JC Penneys</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>Po Box 965060</b> <b>Orlando, FL 32896</b></p> <p>Number Street City State Zip Code <b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input checked="" type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>0903</b></p> <p>When was the debt incurred? <b>Opened 08/08 Last Active 11/22/13</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$0.00</b>
4.6 7	<p><b>Synchrony Bank/Amazon</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>Po Box 965060</b> <b>Orlando, FL 32896</b></p> <p>Number Street City State Zip Code <b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>6817</b></p> <p>When was the debt incurred? <b>Opened 08/14 Last Active 8/02/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$2,149.69</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.6 8	<p><b>Synchrony Bank/Art Van</b> Nonpriority Creditor's Name</p> <p><b>c/o PO Box 965036</b> <b>Orlando, FL 32896</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>5835</b></p> <p>When was the debt incurred? <b>Opened 12/15 Last Active 8/06/17</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$2,264.00</b>
4.6 9	<p><b>Synchrony Bank/Care Credit</b> Nonpriority Creditor's Name</p> <p><b>Attn: Bankruptcy Dept</b> <b>P.O. Box 965060</b> <b>Orlando, FL 32896</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>5103</b></p> <p>When was the debt incurred? <b>Opened 11/16 Last Active 7/28/17</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$1,339.00</b>
4.7 0	<p><b>Synchrony Bank/Care Credit</b> Nonpriority Creditor's Name</p> <p><b>Attn: Bankruptcy Dept</b> <b>P.O. Box 965060</b> <b>Orlando, FL 32896</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>4347</b></p> <p>When was the debt incurred? <b>Opened 12/15 Last Active 8/09/17</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$1,007.00</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

<b>4.7 1</b>	<p><b>Synchrony Bank/Gap</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>P.O. Box 965060</b> <b>Orlando, FL 32896-5060</b></p> <p>Number Street City State Zip Code <b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input checked="" type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>7365</b> <b>\$2,089.00</b></p> <p>When was the debt incurred? <b>Opened 02/13 Last Active 8/25/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>
<b>4.7 2</b>	<p><b>Synchrony Bank/Gap</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>P.O. Box 965060</b> <b>Orlando, FL 32896-5060</b></p> <p>Number Street City State Zip Code <b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>0753</b> <b>\$1,974.00</b></p> <p>When was the debt incurred? <b>Opened 02/13 Last Active 8/02/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>
<b>4.7 3</b>	<p><b>Synchrony Bank/Lowes</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept</b> <b>P.O. Box 965060</b> <b>Orlando, FL 32896</b></p> <p>Number Street City State Zip Code <b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>9474</b> <b>\$608.00</b></p> <p>When was the debt incurred? <b>Opened 11/15 Last Active 9/19/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.7 4	<p><b>Synchrony Bank/PayPal Cr</b>            Nonpriority Creditor's Name  <b>Attn: Bankruptcy Dept</b>  <b>P.O. Box 965060</b>  <b>Orlando, FL 32896-5060</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>0506</b></p> <p>When was the debt incurred? <b>Opened 12/15 Last Active 9/28/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$747.37</b>
4.7 5	<p><b>Synchrony Bank/TJX</b>            Nonpriority Creditor's Name  <b>Attn: Bankruptcy Dept</b>  <b>P.O. Box 965060</b>  <b>Orlando, FL 32896-5060</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only      <input checked="" type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>1695</b></p> <p>When was the debt incurred? <b>Opened 10/15 Last Active 7/21/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$812.71</b>
4.7 6	<p><b>Synchrony Bank/Walmart</b>            Nonpriority Creditor's Name  <b>Attn: Bankruptcy Dept</b>  <b>P.O. Box 965060</b>  <b>Orlando, FL 32896-5060</b></p> <p>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <b>5936</b></p> <p>When was the debt incurred? <b>Opened 03/13 Last Active 7/14/17</b></p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Charge Account</b></p>	<b>\$2,760.00</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

4.7 7 <b>Target</b> Nonpriority Creditor's Name <b>Target Card Services</b> <b>Mail Stop NCB-0461</b> <b>Minneapolis, MN 55440</b> Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>2140</b>  When was the debt incurred? <b>Opened 11/07 Last Active 8/02/17</b>  As of the date you file, the claim is: Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$2,388.00</b>
4.7 8 <b>US Bank</b> Nonpriority Creditor's Name <b>PO BOx 108</b> <b>Saint Louis, MO 63166-0108</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>14,006.45</b>  When was the debt incurred? <b>2017</b>  As of the date you file, the claim is: Check all that apply  <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <b>Business debt - debtor may have personal liability.</b>	
4.7 9 <b>US Bank/RMS CC</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b> <b>P.O. Box 5229</b> <b>Cincinnati, OH 45201</b> Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <b>7423</b>  When was the debt incurred? <b>Opened 11/15 Last Active 5/25/18</b>  As of the date you file, the claim is: Check all that apply  <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Credit Card</b>	<b>\$957.62</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

4.8  
0**Us Dept Of Ed/Great Lakes Higher  
Educati**

Nonpriority Creditor's Name

**Attn: Bankruptcy  
2401 Interanational Lane  
Madison, WI 53704**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**  
**Is the claim subject to offset?**  
 No  
 Yes

Last 4 digits of account number

**8581****\$3,850.00****Opened 09/12 Last Active  
5/27/18****As of the date you file, the claim is:** Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

**Educational**4.8  
1**Von Maur**

Nonpriority Creditor's Name

**Attn: Bankruptcy  
727 Veterans Memorial Parkway  
Davenport, IA 52806**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**  
**Is the claim subject to offset?**  
 No  
 Yes

Last 4 digits of account number

**4223****\$1,634.31****Opened 10/10/09 Last Active  
4/02/18****As of the date you file, the claim is:** Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Charge Account**

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

**American Express  
Merchant Remittance  
PO Box 53765  
Phoenix, AZ 85072-3765**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.4** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**AT&T  
4331 Communications Dr., Floor 4W  
Dallas, TX 75211-1300**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.5** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

**Best Buy Credit Services  
P.O. Box 790441  
St. Louis, MO 63179**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.16** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**7292**

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

Name and Address <b>Bureaus Investment Group Portfolio No. 15, LLC 650 Dundee Road, Suite 370 Northbrook, IL 60062</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.14</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	<b>8998</b>
Name and Address <b>Cardmember Service Attn: Bankruptcy Dept. P.O. Box 6335 Fargo, ND 58125-6335</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.79</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	<b>7423</b>
Name and Address <b>CCB Credit Services 5300 S. 6th St. Springfield, IL 62703-5184</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.52</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	<b>F879</b>
Name and Address <b>Chase Card Member Services PO Box 1423 Charlotte, NC 28201-1423</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.15</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	
Name and Address <b>Comenity Capital Bank Bankruptcy Dept. P.O. Box 183043 Columbus, OH 43218-3043</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.20</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	<b>3686</b>
Name and Address <b>Country Financial Amy Linduska 360 Schick Rd., #20 Bloomingdale, IL 60108-2965</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.24</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	
Name and Address <b>Credit Control LLC P.O. Box 31179 Tampa, FL 33631-3179</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.50</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	<b>3806</b>
Name and Address <b>Darling Ingredients, Inc. 3000 Wireton Rd Blue Island, IL 60406-1861</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.28</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	
Name and Address <b>Discover Card Attn: BK Dept. P.O. Box 30421 Salt Lake City, UT 84130-0421</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.29</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	<b>4929</b>
Name and Address <b>First Bankcard Attn: Bankruptcy Dept. P.O. Box 3696 Omaha, NE 68103-0696</b>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.42</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	<b>9188</b>
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

**Genpact Services LLC**  
**P.O. Box 1969**  
**Southgate, MI 48195-0969**Line **4.73** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**1477**Name and Address  
**GTT**  
**180 N. LaSalle Street, Ste 2430**  
**Chicago, IL 60601-2704**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.46** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Home Depot Credit Services**  
**P.O. Box 790328**  
**St. Louis, MO 63179**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0823**Name and Address  
**JCPenney**  
**Attn: BK Dept.**  
**P.O. Box 965009**  
**Orlando, FL 32896-5009**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.65** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**0171**Name and Address  
**Lowe's**  
**Attn: BK Dept.**  
**P.O. Box 965004**  
**Orlando, FL 32896-5004**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.73** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**9474**Name and Address  
**Mandarich Law Group LLP**  
**420 N. Wabash Ave., Suite 400**  
**Chicago, IL 60611**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.49** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Mark W. Daniel**  
**17W33 Butterfield Road, Ste F**  
**Villa Park, IL 60181-4281**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Meyer Njus & Tanick**  
**330 Second Avenue South, Suite**  
**350**  
**Minneapolis, MN 55401**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.61** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**9593**Name and Address  
**Meyer Njus & Tanick**  
**330 Second Avenue South, Suite**  
**350**  
**Minneapolis, MN 55401**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.67** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**6817**Name and Address  
**Meyer Njus & Tanick**  
**330 Second Avenue South, Suite**  
**350**  
**Minneapolis, MN 55401**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.75** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**1695**Name and Address  
**Michael Raymond Liss**  
**Liss & Lamar PC**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.51** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known)

**1301 W 22Nd St Ste 709  
Oak Brook, IL 60523-2070**

Last 4 digits of account number

Name and Address  
**Northland Group**  
**P.O. Box 390905**  
**Minneapolis, MN 55439**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.16 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**9230**Name and Address  
**Radius Global Solutions LLC**  
**P.O. Box 390905**  
**Minneapolis, MN 55439**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.50 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**9555**Name and Address  
**Republic Services**  
**PO Box 9001154**  
**Louisville, KY 40290-1154**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.59 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Richard L. Hirsh**  
**1500 Eisenhower Lane, #800**  
**Lisle, IL 60532**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.47 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Stoneleigh Recovery Associates**  
**P.O. Box 1479**  
**Lombard, IL 60148-8479**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.14 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**1153**Name and Address  
**Synchrony Bank**  
**Attn: BK Dept.**  
**P.O. Box 965004**  
**Orlando, FL 32896-5003**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.69 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**5103**Name and Address  
**Synchrony Bank**  
**Attn: BK Dept.**  
**P.O. Box 965004**  
**Orlando, FL 32896-5004**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.70 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4347**Name and Address  
**TD Bank USA NA**  
**c/o Target Card Services**  
**P.O. Box 9500**  
**Minneapolis, MN 55440**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.77 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4177**Name and Address  
**U.S. Small Business Administration**  
**Birmingham Loan Servicing Center**  
**2 North 20th Street, Ste 320**  
**Birmingham, AL 35203**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**United States of America**  
**Small Business Administration**  
**500 W. Madison St.**  
**Chicago, IL 60661-4544**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.3 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Debtor 1 **Glenn M Cygan**  
 Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name and Address

**US Bank/US Bank Edge  
 PO Box 790408  
 Saint Louis, MO 63179-0408**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.78** of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

Name and Address

**Von Maur  
 Attn: Bankruptcy Dept.  
 6565 Brady St.  
 Davenport, IA 52806**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.81** of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number \_\_\_\_\_

**4223**

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	Total Claim
6a. Domestic support obligations	6a. \$ <b>0.00</b>
6b. Taxes and certain other debts you owe the government	6b. \$ <b>0.00</b>
6c. Claims for death or personal injury while you were intoxicated	6c. \$ <b>0.00</b>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$ <b>0.00</b>
6e. Total Priority. Add lines 6a through 6d.	6e. \$ <b>0.00</b>
6f. Student loans	6f. \$ <b>56,066.00</b>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ <b>0.00</b>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ <b>0.00</b>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. \$ <b>647,717.40</b>
6j. Total Nonpriority. Add lines 6f through 6i.	6j. \$ <b>703,783.40</b>

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra A Cygan</b>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			State what the contract or lease is for
2.1	Name	Number Street	City State ZIP Code
2.2	Name	Number Street	City State ZIP Code
2.3	Name	Number Street	City State ZIP Code
2.4	Name	Number Street	City State ZIP Code
2.5	Name	Number Street	City State ZIP Code

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra A Cygan</b>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

**1. Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

- No  
 Yes

**2. Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

**3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

**Column 1: Your codebtor**

Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.1   **Joseph J. Bracken**  
5290 Westview Lane  
Lisle, IL 60532-2420

- Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.51  
 Schedule G \_\_\_\_\_  
**Maple Terrace Management LP**

3.2   **Joseph J. Bracken**  
5290 Westview Lane  
Lisle, IL 60532-2420

- Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.56  
 Schedule G \_\_\_\_\_  
**Papa John's**

3.3   **Joseph J. Bracken**  
5290 Westview Lane  
Lisle, IL 60532-2420

- Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.4  
 Schedule G \_\_\_\_\_  
**AMEX**

Debtor 1 **Glenn M Cygan**  
**Debra A Cygan**

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

**Column 1: Your codebtor**

**Column 2: The creditor to whom you owe the debt**  
Check all schedules that apply:

3.4 **Joseph J. Bracken**  
**5290 Westview Lane**  
**Lisle, IL 60532-2420**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.24**  
 Schedule G \_\_\_\_\_  
**Country Financial**

3.5 **Joseph J. Bracken**  
**5290 Westview Lane**  
**Lisle, IL 60532-2420**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.2**  
 Schedule G \_\_\_\_\_  
**Alfac**

3.6 **Joseph J. Bracken**  
**5290 Westview Lane**  
**Lisle, IL 60532-2420**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.6**  
 Schedule G \_\_\_\_\_  
**AT&T**

3.7 **Joseph J. Bracken**  
**5290 Westview Lane**  
**Lisle, IL 60532-2420**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.7**  
 Schedule G \_\_\_\_\_  
**AT&T Mobility**

3.8 **Joseph J. Bracken**  
**5290 Westview Lane**  
**Lisle, IL 60532-2420**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.28**  
 Schedule G \_\_\_\_\_  
**Darling Ingredients, Inc.**

3.9 **Joseph J. Bracken**  
**5290 Westview Lane**  
**Lisle, IL 60532-2420**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.46**  
 Schedule G \_\_\_\_\_  
**GTE Communications, Inc.**

3.10 **Joseph J. Bracken**  
**5290 Westview Lane**  
**Lisle, IL 60532-2420**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.58**  
 Schedule G \_\_\_\_\_  
**Precision Heating & Cooling**

3.11 **Joseph J. Bracken**  
**5290 Westview Lane**  
**Lisle, IL 60532-2420**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.59**  
 Schedule G \_\_\_\_\_  
**Republic Services**

Glenn M Cygan  
Debtor 1 Debra A Cygan

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

*Column 1: Your codebtor*

*Column 2: The creditor to whom you owe the debt*  
Check all schedules that apply:

3.12 Joseph J. Bracken  
5290 Westview Lane  
Lisle, IL 60532-2420

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.15  
 Schedule G \_\_\_\_\_  
**Chase**

3.13 Joseph J. Bracken  
5290 Westview Lane  
Lisle, IL 60532-2420

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.3  
 Schedule G \_\_\_\_\_  
**American Enterprise Bank**

Fill in this information to identify your case:

Debtor 1	<u>Glenn M Cygan</u>
Debtor 2 (Spouse, if filing)	<u>Debra A Cygan</u>
United States Bankruptcy Court for the:	<u>NORTHERN DISTRICT OF ILLINOIS</u>
Case number (If known)	_____

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Employment status	Debtor 1	Debtor 2 or non-filing spouse
		<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
	Occupation	<u>Memories In the Making</u>	<u>Lunch Supervision School</u>
	Employer's name	<u>self</u>	<u>Lisle Dist 202</u>
	Employer's address	<u>801 Inverness Road Lisle, IL 60532</u>	

How long employed there? 10 years 1 year

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>2,346.20</u>	\$ <u>615.72</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>2,346.20</u>	\$ <u>615.72</u>

Debtor 1 **Glenn M Cygan**  
 Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

Copy line 4 here .....	For Debtor 1	For Debtor 2 or non-filing spouse
	4. \$ <u>2,346.20</u>	\$ <u>615.72</u>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>331.76</u>	\$ <u>197.72</u>
5b. Mandatory contributions for retirement plans	5b. \$ <u>0.00</u>	\$ <u>0.00</u>
5c. Voluntary contributions for retirement plans	5c. \$ <u>0.00</u>	\$ <u>0.00</u>
5d. Required repayments of retirement fund loans	5d. \$ <u>0.00</u>	\$ <u>0.00</u>
5e. Insurance	5e. \$ <u>0.00</u>	\$ <u>0.00</u>
5f. Domestic support obligations	5f. \$ <u>0.00</u>	\$ <u>0.00</u>
5g. Union dues	5g. \$ <u>0.00</u>	\$ <u>0.00</u>
5h. Other deductions. Specify: _____	5h.+ \$ <u>0.00</u>	+ \$ <u>0.00</u>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <u>331.76</u>	\$ <u>197.72</u>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. \$ <u>2,014.44</u>	\$ <u>418.00</u>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u>0.00</u>	\$ <u>0.00</u>
8b. Interest and dividends	8b. \$ <u>0.00</u>	\$ <u>0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <u>0.00</u>	\$ <u>0.00</u>
8d. Unemployment compensation	8d. \$ <u>0.00</u>	\$ <u>0.00</u>
8e. Social Security	8e. \$ <u>0.00</u>	\$ <u>0.00</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ <u>0.00</u>	\$ <u>0.00</u>
8g. Pension or retirement income	8g. \$ <u>0.00</u>	\$ <u>0.00</u>
8h. Other monthly income. Specify: <u>The Making Mileage Reimbursement for business miles</u>	8h.+ \$ <u>0.00</u>	+ \$ <u>1,100.00</u>
	\$ <u>1,200.00</u>	\$ <u>0.00</u>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <u>1,200.00</u>	\$ <u>1,100.00</u>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u>3,214.44</u>	+ \$ <u>1,518.00</u> = \$ <u>4,732.44</u>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ <u>0.00</u>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ <u>4,732.44</u>	
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>	<input checked="" type="checkbox"/> No.	
	<input type="checkbox"/> Yes. Explain: _____	
Combined monthly income		

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>
Debtor 2	<b>Debra A Cygan</b>
(Spouse, if filing)	
United States Bankruptcy Court for the:	<b>NORTHERN DISTRICT OF ILLINOIS</b>
Case number (If known)	

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

##### 1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

##### 2. Do you have dependents? No

Do not list Debtor 1 and  
Debtor 2.

Yes.

Fill out this information for  
each dependent.....

Dependent's relationship to  
Debtor 1 or Debtor 2

Dependent's  
age

Does dependent  
live with you?

Do not state the  
dependents names.

Son

13

- No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

Daughter

16

##### 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know  
the value of such assistance and have included it on Schedule I: Your Income  
(Official Form 106I.)

##### 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **1,975.00**

#### Your expenses

##### If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues  
 5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	<b>0.00</b>
4b. \$	<b>0.00</b>
4c. \$	<b>0.00</b>
4d. \$	<b>0.00</b>
5. \$	<b>0.00</b>

Debtor 1 **Glenn M Cygan**  
 Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

6. <b>Utilities:</b>	6a. Electricity, heat, natural gas	6a. \$ <u>150.00</u>
	6b. Water, sewer, garbage collection	6b. \$ <u>175.00</u>
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>300.00</u>
	6d. Other. Specify: _____	6d. \$ <u>0.00</u>
7. <b>Food and housekeeping supplies</b>	7. \$ <u>400.00</u>	
8. <b>Childcare and children's education costs</b>	8. \$ <u>25.00</u>	
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ <u>10.00</u>	
10. <b>Personal care products and services</b>	10. \$ <u>10.00</u>	
11. <b>Medical and dental expenses</b>	11. \$ <u>50.00</u>	
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>200.00</u>	
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <u>10.00</u>	
14. <b>Charitable contributions and religious donations</b>	14. \$ <u>5.00</u>	
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$ <u>200.00</u>	
15b. Health insurance	15b. \$ <u>0.00</u>	
15c. Vehicle insurance	15c. \$ <u>400.00</u>	
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>	
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>	
17. <b>Installment or lease payments:</b>	17a. \$ <u>299.00</u>	
17b. Car payments for Vehicle 2	17b. \$ <u>495.00</u>	
17c. Other. Specify: _____	17c. \$ <u>0.00</u>	
17d. Other. Specify: _____	17d. \$ <u>0.00</u>	
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ <u>0.00</u>	
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	\$ <u>0.00</u>	
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$ <u>0.00</u>	
20b. Real estate taxes	20b. \$ <u>0.00</u>	
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>	
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>	
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>	
21. <b>Other:</b> Specify: _____	21. +\$ <u>0.00</u>	
22. <b>Calculate your monthly expenses</b>		
22a. Add lines 4 through 21.	\$ <u>4,704.00</u>	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>4,704.00</u>	
22c. Add line 22a and 22b. The result is your monthly expenses.		
23. <b>Calculate your monthly net income.</b>		
23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.	23a. \$ <u>4,732.44</u>	
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>4,704.00</u>	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <u>28.44</u>	
24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.	Explain here: _____	

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra A Cygan</b>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ **Glenn M Cygan**

**Glenn M Cygan**  
Signature of Debtor 1

Date August 14, 2018

X /s/ **Debra A Cygan**

**Debra A Cygan**  
Signature of Debtor 2

Date August 14, 2018

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra A Cygan</b>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- Married  
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1  
lived there

Debtor 2 Prior Address:

Dates Debtor 2  
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

#### Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No  
 Yes. Fill in the details.

	Debtor 1	Debtor 2		
From January 1 of current year until the date you filed for bankruptcy:	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$18,196.41	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$7,028.05

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

	<b>Debtor 1</b>	<b>Debtor 2</b>		
	<b>Sources of income</b> Check all that apply.	<b>Gross income</b> (before deductions and exclusions)	<b>Sources of income</b> Check all that apply.	<b>Gross income</b> (before deductions and exclusions)
<b>For last calendar year:</b> <b>(January 1 to December 31, 2017 )</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips  <input checked="" type="checkbox"/> Operating a business	<b>\$30,587.58</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips  <input type="checkbox"/> Operating a business	<b>\$12,479.21</b>
<b>For the calendar year before that:</b> <b>(January 1 to December 31, 2016 )</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips  <input checked="" type="checkbox"/> Operating a business	<b>\$37,823.57</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips  <input type="checkbox"/> Operating a business	<b>\$5,379.31</b>

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- No  
 Yes. Fill in the details.

	<b>Debtor 1</b>	<b>Debtor 2</b>		
	<b>Sources of income</b> Describe below.	<b>Gross income from each source</b> (before deductions and exclusions)	<b>Sources of income</b> Describe below.	<b>Gross income</b> (before deductions and exclusions)
<b>For last calendar year:</b> <b>(January 1 to December 31, 2017 )</b>	Unemployment	\$5,060.00	Unemployment	\$216.00
		\$0.00	withdrawal from retirement account	\$629.23

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

- No. Go to line 7.  
 Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.  
 Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

<b>Creditor's Name and Address</b>	<b>Dates of payment</b>	<b>Total amount paid</b>	<b>Amount you still owe</b>	<b>Was this payment for ...</b>

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

- No  
 Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

- No  
 Yes. List all payments to an insider

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
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**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

- No  
 Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
Retailers National Bank vs GLENN CYGAN	JUDGMENT	DUPAGE COUNTY, ILLINOIS	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

739.59

PNC Bank NA v. Glenn M Cygan, Debra Cygan, IL Housing Authority 2017 CH 001532	Foreclosure	DuPage	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
LVNV Funding v. Glenn Cygan 18 SC 3304	Collection	DuPage	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**  
Check all that apply and fill in the details below.

- No. Go to line 11.  
 Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the property
	Explain what happened		

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No  
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No  
 Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No  
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No  
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
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#### Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No  
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
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#### Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No  
 Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Law office of Douglas Worrell, Ltd. 1625 W. Colonial Parkway Inverness, IL 60067 bk@thelawoffice.us	Attorney Fees \$2,000	Oct. 2017 and April 2018	\$2,000.00

Debtor 1 **Glenn M Cygan**  
 Debtor 2 **Debra A Cygan**

Case number (*if known*)

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  
 Do not include any payment or transfer that you listed on line 16.

No  
 Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
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18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No  
 Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No  
 Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
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#### **Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No  
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No  
 Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No  
 Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
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Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (*if known*)

**Part 9: Identify Property You Hold or Control for Someone Else**

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
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**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**Case number (*if known*) \_\_\_\_\_

- No. None of the above applies. Go to Part 12.
- Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed
<b>Memories In The Making, Inc.</b> <b>801 Inverness Road</b> <b>Lisle, IL 60532</b>	<b>Monuments and headstones</b>	EIN: <b>46-3300229</b>  From-To <b>July 2013</b>
<b>Joe Zak, Inc.</b> <b>closed</b> <b>1044 Maple Ave.</b> <b>Lisle, IL 60532</b>	<b>Pizza - Papa John's Pizza</b>	EIN:  From-To <b>4/2016 - 10/2017</b>

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No  
 Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
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#### Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ **Glenn M Cygan**  
**Glenn M Cygan**  
Signature of Debtor 1

Date August 14, 2018

/s/ **Debra A Cygan**  
**Debra A Cygan**  
Signature of Debtor 2

Date August 14, 2018

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No  
 Yes. Name of Person \_\_\_\_\_. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<b>Glenn M Cygan</b>		
	First Name	Middle Name	Last Name
Debtor 2	<b>Debra A Cygan</b>		
(Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)			

Check if this is an amended filing

## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
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Creditor's name: **A. Alliance Collection Agency, Inc.**

- Surrender the property.
- Retain the property and redeem it.
- Retain the property and enter into a *Reaffirmation Agreement*.
- Retain the property and [explain]: \_\_\_\_\_

No

Yes

Description of property securing debt: **2012 Honda Civic 37000 miles**

- Creditor's name: **Ally Financial**
- Surrender the property.
  - Retain the property and redeem it.
  - Retain the property and enter into a *Reaffirmation Agreement*.
  - Retain the property and [explain]: \_\_\_\_\_

No

Yes

Description of property securing debt: **2013 RAM 1500 94000 miles**

- Creditor's name: **Fifth Third Bank**
- Surrender the property.
  - Retain the property and redeem it.
  - Retain the property and enter into a *Reaffirmation Agreement*.
  - Retain the property and [explain]: \_\_\_\_\_

No

Yes

Description of property securing debt: **Credit Line Secured by \$1,200 CD**

Debtor 1 **Glenn M Cygan**  
Debtor 2 **Debra A Cygan**

Case number (if known) \_\_\_\_\_

securing debt: \_\_\_\_\_

Creditor's **PNC Mortgage**

name: \_\_\_\_\_

Description of property **801 Inverness Road Lisle, IL  
60532 DuPage County  
single family house**

- Surrender the property.  No  
 Retain the property and redeem it.  Yes  
 Retain the property and enter into a *Reaffirmation Agreement*.  
 Retain the property and [explain]:  
**modify mortgage and continue to pay**

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases**

**Will the lease be assumed?**

Lessor's name: \_\_\_\_\_

No

Description of leased Property: \_\_\_\_\_

Yes

Lessor's name: \_\_\_\_\_

No

Description of leased Property: \_\_\_\_\_

Yes

Lessor's name: \_\_\_\_\_

No

Description of leased Property: \_\_\_\_\_

Yes

Lessor's name: \_\_\_\_\_

No

Description of leased Property: \_\_\_\_\_

Yes

Lessor's name: \_\_\_\_\_

No

Description of leased Property: \_\_\_\_\_

Yes

Lessor's name: \_\_\_\_\_

No

Description of leased Property: \_\_\_\_\_

Yes

Lessor's name: \_\_\_\_\_

No

Description of leased Property: \_\_\_\_\_

Yes

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Glenn M Cygan

**Glenn M Cygan**

Signature of Debtor 1

X /s/ Debra A Cygan

**Debra A Cygan**

Signature of Debtor 2

Date August 14, 2018

Date August 14, 2018

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

**You are an individual filing for bankruptcy,**  
and

**Your debts are primarily consumer debts.**  
*Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

**You should have an attorney review your decision to file for bankruptcy and the choice of chapter.**

### Chapter 7: Liquidation

\$245	filings fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

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## Chapter 11: Reorganization

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\$1,167	filing fee
+ \$550	administrative fee
\$1,717 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

## Read These Important Warnings

**Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.**

**Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.**

**You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.**

**Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

### Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+ \$75	<u>administrative fee</u>
\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+ \$75	<u>administrative fee</u>
\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### **Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

[http://www.uscourts.gov/bkforms/bankruptcy\\_form\\_s.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure).

### **Bankruptcy crimes have serious consequences**

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### **Make sure the court has your mailing address**

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### **Understand which services you could receive from credit counseling agencies**

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:  
[http://justice.gov/ust/eo/hapcpa/ccde/cc\\_approved.html](http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html)

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**United States Bankruptcy Court**  
**Northern District of Illinois**

In re **Glenn M Cygan**  
**Debra A Cygan**

Debtor(s)

Case No.

Chapter

7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <u>2,000.00</u>
Prior to the filing of this statement I have received .....	\$ <u>2,000.00</u>
Balance Due .....	\$ <u>0.00</u>

2. \$ 335.00 of the filing fee has been paid.

3. The source of the compensation paid to me was:

Debtor       Other (specify):

4. The source of compensation to be paid to me is:

Debtor       Other (specify):

5.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

August 14, 2018

Date

/s/ Douglas W. Worrell

**Douglas W. Worrell**

*Signature of Attorney*

**Law office of Douglas Worrell, Ltd.**

**1625 W. Colonial Parkway**

**Inverness, IL 60067**

**847-241-2074 Fax: 847-241-2080**

**bk@thelawoffice.us**

*Name of law firm*

**We are a debt relief agency. We help people file for bankruptcy relief under the bankruptcy code.**

If you receive services from our office regarding bankruptcy, the law requires that you and I sign a written agreement. If you wish to hire us, you must sign below. Our office will file a Bankruptcy Proceeding with all the papers required to be filed therewith for the fees set forth below. An attorney from our office will also be with you at the "meeting of creditors." The court charges the filing fee listed below. Basic Fees and possible Additional Fees are listed below. Attached are additional terms of the retainer agreement.

If you sign below, you are agreeing to do the following:

- 1) To completely and honestly fill out all the forms provided to you
- 2) To provide all the documentation requested
- 3) To promptly respond to any inquiries we make
- 4) To pay all fees within 7 days of billing and to pay the Basic Fees in full before filing of your petition.

DOWN PAYMENT FOR CHAPTER 7 \$ 125.00 DATE June 12, 2018

We accept cash, checks or money orders. **We cannot accept credit cards for payment.**

**Basic Fees:**

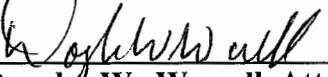
<u>2,000</u>	Preparation of Petition and Basic Services
<u>335.00</u>	Filing Fee (Charged by Bankruptcy Court)
<u>2,335.00</u>	Basic Total

**Possible Additional Charges**

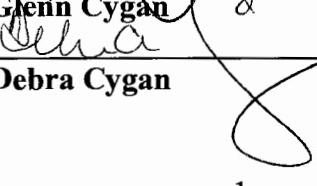
\$125 Per hour additional charge if forms & data like P&L statements & accountings are not completed by client  
\$75 Extraordinary Number of Creditors (over 50)  
\$75 Filing Claims for Creditors  
\$175 Minimum for getting lawsuit continued or dismissed  
\$75 Prevention of Power or Telephone Shutoff/Restoration of Service  
\$200 Appearance at Continued Meeting of Creditors  
\$100 Amendment to Petition After Filing (includes filing fee)  
\$100 Stop Wage Garnishment  
\$50 Reaffirmation Agreements or Redemption Agreements (above 4)  
\$250 per hour Setting Aside Liens against personal property or real estate  
\$200 For appearance at court hearing on reaffirmation agreement.

**Fees Requiring Additional Retainer Before Service:**

\$250 per hour	Objection to Motion to Lift Automatic Stay
\$250 per hour	Objection to Discharge or Motion to Require Chapter 13
\$250 per hour	Dispute over Exemptions or Preferential Payments
\$250 per hour	Surrender of Real Estate/Foreclosure Proceedings
\$250 per hour	Dispute over value of Security
\$275 per hour	Prosecution or Defense of Adversary claims
\$250 per hour	Motions to compel the Trustee to abandon assets
\$250 per hour	Motion to extend any deadline.

  
Douglas W. Worrell, Attorney

  
Glenin Cygan

  
Debra Cygan

**Dated: June 12, 2018**

**Dated: June 12, 2018**

1. ATTORNEY SERVICES. Attorney shall provide Client with the following services:

- a. Review and analyze Clients financial circumstances based on information provided by Client and a recent credit report.
- b. Based on the information provided by Client, advise Client of the various options, including bankruptcy and non-bankruptcy solutions where available.
- c. Inform Client as to what information Client needs to provide Attorney in order to provide appropriate advice and option information, in the event such information Client provided is insufficient.
- d. Advise Client of the appropriate requirements in connection with the filing of a Chapter 7 or Chapter 13 bankruptcy, including the duties of Client connected with such filing and the differences with each.
- e. Quote the Client an estimated fee, to the extent possible given the information provided by Client, for the Attorneys service relative to providing bankruptcy assistance or other legal services to Client.
- f. Assuming that a U.S. Bankruptcy proceeding is filed, Attorney services will include Preparing and filing all petitions, statements, and schedules, and all typical Attorney required participation in such proceeding, including but not limited to, appearance at Client's 341 Meeting of Creditors, communications with Client's case trustee as well as the US Trustee, and communication with creditors, when appropriate. Also included are obtaining and filing reaffirmation agreements with secured creditors where appropriate and desired by Client.
- g. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, fully apprise Client of the fees, payment requirements, and expected services to be provided. Attorney's hourly rate for non-customary work is \$250 or other charges and rates listed on page one.

2. FULL DISCLOSURE. Client acknowledges his/her obligation to make full and complete disclosure of all assets, all liabilities, and all information required in the documents to be filed, and to provide all documents and information requested by the Attorney, before the bankruptcy petition can be prepared and filed with the court.

3. CREDIT COUNSELING. Client acknowledges that he/she must take a pre-bankruptcy credit counseling course before the bankruptcy petition can be filed. Client understands that he/she must also complete pre-discharge financial management course after the bankruptcy petition is filed and within the time frame allowed by statute. Client acknowledges that the bankruptcy cannot be filed without the certificate of completion of the pre-bankruptcy credit counseling and that Client will be denied a discharge if the second class in financial management is not timely completed. Client agrees to complete the 2nd course prior to Client's 341 Meeting of Creditors.

4. Client acknowledges that Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Client's bankruptcy case. The Attorney may make a special appearance in a court, other than the Bankruptcy Court, for the purpose of filing a notification of Client's bankruptcy proceedings, and to suggest to another court that Client's proceedings should be stayed. Sending or receiving any summons or complaint, or notifying the Attorney of a pending lawsuit does not obligate the

Attorney to represent Client in that lawsuit or before that court. Any representation of Client in a state court proceeding, including without limitation: collection lawsuits, foreclosure lawsuits, etc., is not included in this Bankruptcy Retainer Agreement. Any referral made to another Attorney to represent Client is a courtesy only. The Attorney is not associated with any other Attorney outside of the our law office.

5. Client acknowledges that the Attorney will not research creditor information, including addresses, account numbers, or balances other than obtaining a credit report. The Client must provide this information to the Attorney in writing and failure to do so may result in unscheduled debts not being discharged.
6. Client agrees that the following matters are not included within the scope of this Bankruptcy Retainer Agreement. Client agrees that, as to the matters listed below, the Attorney will not take any action on Client's behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:
  - a. Motions to revoke a discharge;
  - b. Removal of a pending action in another court;
  - c. Obtaining title reports;
  - d. The determination of real estate or tax liens;
  - e. Appeals to the District Court or Court of Appeals;
  - f. Correcting credit reports;
  - g. Negotiations with Check Systems regarding Client;
  - h. Any adversary proceeding filed by the Trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargeability of debts;
  - i. Negotiating reaffirmation agreements when Client's income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement;
  - j. Motions to redeem personal property;
  - k. Motion to impose or extend the bankruptcy stay.
  - l. Objects to claims requiring a hearing.
  - m. Objections to Trustee settlement of claims requiring briefing or hearing.

7. LIENS. A Bankruptcy does not automatically discharge or remove liens from any real estate. Client agrees that the Attorney will not take any action to avoid (remove) any lien on real estate unless Client specifically authorizes the Attorney to do so in writing. Client agrees that the Attorney will rely on Client's statements concerning ownership of real property and any liens attached to Client's real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must

separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Client wishes to obtain one. Client agrees to hold the Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Client's real estate.

8. AUDITS. Client understands that individuals who file for relief under Chapter 7 or Chapter 13 of the Bankruptcy Code are subject to audits by the U.S. Trustee. If Client's case is selected for an audit, Client agrees to pay Attorney the customary hourly rate for representing Client in such audit.
9. NON-DISCHARGEABLE DEBTS. Client acknowledges they have been informed that certain debts are not discharged by a bankruptcy; including but not limited to student loans; child support; domestic support obligations, governmental fines, most federal and state taxes; debts incurred by fraud; and debts incurred as a result of operating a vehicle while intoxicated.
10. RIGHT TO WITHDRAW. Attorney reserves the right to withdraw from Client's representation if, among other things, Client fails to honor the terms of this Agreement, including non-payment of Attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all Attorneys in the State of Illinois and Attorney is an officer of the court. If a Client, in the course of representation by an Attorney, perpetrates a fraud upon any person or tribunal, the Attorney is obligated to call upon the Client to rectify the same.
11. NO GUARANTEES OF OUTCOME. Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.

**United States Bankruptcy Court  
Northern District of Illinois**

In re **Glenn M Cygan  
Debra A Cygan**

Debtor(s)

Case No.

Chapter

**7**

**VERIFICATION OF CREDITOR MATRIX**

Number of Creditors: \_\_\_\_\_ **107**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: **August 14, 2018**

/s/ **Glenn M Cygan**

**Glenn M Cygan**

Signature of Debtor

Date: **August 14, 2018**

/s/ **Debra A Cygan**

**Debra A Cygan**

Signature of Debtor

A Bella Baby OBGYN  
4333 Main St.  
Downers Grove, IL 60515

A. Alliance Collection Agency, Inc.  
4180 RFD Route 83  
Suite 208  
Lake Zurich, IL 60047-9582

Alfac  
1932 Wynnton Road  
Columbus, GA 31999-0001

Ally Financial  
Attn: Bankruptcy Dept  
Po Box 380901  
Bloomington, MN 55438

American Enterprise Bank  
275 S. Roselle Road  
Schaumburg, IL 60193

American Express  
Merchant Remittance  
PO Box 53765  
Phoenix, AZ 85072-3765

AMEX  
PO Box 299051  
Fort Lauderdale, FL 33329-9051

AT&T  
P.O. Box 10330  
Fort Wayne, IN 46851-0330

AT&T  
PO Box 5080  
Carol Stream, IL 60197-5080

AT&T  
4331 Communications Dr., Floor 4W  
Dallas, TX 75211-1300

AT&T Mobility  
PO Box 6463  
Carol Stream, IL 60197-6463

Aurora Diagnostics  
Pinkus Dermatopathology Laboratory  
16344 Collection Ctr Dr.  
Chicago, IL 60693-0163

Best Buy Credit Services  
P.O. Box 790441  
St. Louis, MO 63179

BP/SYNCB  
PO Box 530942  
Atlanta, GA 30353-0942

Bureaus Investment Group  
Portfolio No. 15, LLC  
650 Dundee Road, Suite 370  
Northbrook, IL 60062

Capital One  
Attn: Bankruptcy  
P.O. Box 30285  
Salt Lake City, UT 84130-0285

Capital One Na  
Attn: General Correspondence/BK  
PO Box 30285  
Salt Lake City, UT 84130

Capital One/Helzberg  
Attn: Bankruptcy  
P.O. Box 30257  
Salt Lake City, UT 84130-0257

Cardmember Service  
Attn: Bankruptcy Dept.  
P.O. Box 6335  
Fargo, ND 58125-6335

CCB Credit Services  
5300 S. 6th St.  
Springfield, IL 62703-5184

Chase  
Attn: Bankruptcy Dept  
Po Box 100018  
Kennesaw, GA 30156

Chase Card Member Services  
PO Box 1423  
Charlotte, NC 28201-1423

Citibank/Best Buy  
Centralized Bankruptcy  
Po Box 790034  
St Louis, MO 63179

Citibank/The Home Depot  
Centralized Bankruptcy  
Po Box 790034  
St. Louis, MO 63179

Comenity Bank/Meijer  
Attn: Bankruptcy  
P.O. Box 182273  
Columbus, OH 43218-2273

Comenity Bank/Sports Authority  
Attn: Bankruptcy Dept  
Po Box 182125  
Columbus, OH 43218-2125

Comenity Bank/Ulta Beauty  
Attn: Bankruptcy Dept  
Po Box 182125  
Columbus, OH 43218

Comenity Bank/Victoria Secret  
Attn: Bankruptcy Dept  
P.O. Box 182125  
Columbus, OH 45318-2125

Comenity Capital Bank  
Bankruptcy Dept.  
P.O. Box 183043  
Columbus, OH 43218-3043

Comenity Capital/Forever 21  
Attn: Bankruptcy Dept  
P.O. Box 183043  
Columbus, OH 43218-3043

Costco Go Anywhere Citicard  
Citicorp Credit Svs/Centralized BK  
P.O. Box 790040  
St. Louis, MO 64195

Country Financial  
PO Box 2100  
Bloomington, IL 61702-2100

Country Financial  
Amy Linduska  
360 Schick Rd., #20  
Bloomingdale, IL 60108-2965

Credit Control LLC  
P.O. Box 31179  
Tampa, FL 33631-3179

Credit One Bank  
Attn: Bankruptcy  
P.O. Box 98873  
Las Vegas, NV 89193-8873

Darling Ingredients, Inc.  
PO Box 552210  
Detroit, MI 48255-2210

Darling Ingredients, Inc.  
3000 Wireton Rd  
Blue Island, IL 60406-1861

Discover Card  
Attn: BK Dept.  
P.O. Box 30421  
Salt Lake City, UT 84130-0421

Discover Financial  
P.O. Box 3025  
New Albany, OH 43054

Easypay/dvra  
Attn: Bankruptcy  
Po Box 2549  
Carlsbad, CA 92018

Easypay/dvra  
Attn: Bankruptcy  
P.O. Box 2549  
Carlsbad, CA 92018

FedLoan Servicing  
Attention: Bankruptcy  
Po Box 69184  
Harrisburg, PA 17106

FedLoan Servicing  
Po Box 60610  
Harrisburg, PA 17106

Fifth Third Bank  
Attn: Bankruptch Department  
1830 E Paris Ave Se  
Grand Rapids, MI 49546

Fifth Third Bank  
Customer Service MD 1MOC2G  
5050 Kingsley Dr.  
Cincinnati, OH 45227-1115

First Bankcard  
P.O. Box 3331  
Omaha, NE 68103-0331

First Bankcard  
Attn: Bankruptcy Dept.  
P.O. Box 3696  
Omaha, NE 68103-0696

First National Bank  
Attn: Tina  
1620 Dodge St Mailstop 4440  
Omaha, NE 68197

First Premier Bank  
Po Box 5524  
Sioux Falls, SD 57117

General Revenue Corp  
4660 Duke Drive  
Mason, OH 45040

Genpact Services LLC  
P.O. Box 1969  
Southgate, MI 48195-0969

GTE Communications, Inc.  
PO Box 842630  
Dallas, TX 75284-2630

GTT  
180 N. LaSalle Street, Ste 2430  
Chicago, IL 60601-2704

Home Depot Credit Services  
P.O. Box 790328  
St. Louis, MO 63179

Honda Financial Services  
P.O. Box 5308  
Elgin, IL 60121-5308

JCPenney  
Attn: BK Dept.  
P.O. Box 965009  
Orlando, FL 32896-5009

Joseph J. Bracken  
5290 Westview Lane  
Lisle, IL 60532-2420

Kohls/Capital One  
Kohls Credit  
Po Box 3120  
Milwaukee, WI 53201

Lowe's  
Attn: BK Dept.  
P.O. Box 965004  
Orlando, FL 32896-5004

LVNV Funding/Resurgent Capital  
Po Box 10497  
Greenville, SC 29603

Macy's/Visa Dept Store Natl Bank  
Attn: Bankruptcy  
P.O. Box 8066  
Mason, OH 45040

Mandarich Law Group LLP  
420 N. Wabash Ave., Suite 400  
Chicago, IL 60611

Maple Terrace Management LP  
707 Skokie Blvd, Ste 100  
Northbrook, IL 60062

Mark W. Daniel  
17W33 Butterfield Road, Ste F  
Villa Park, IL 60181-4281

MB Financial Bank  
Mb Financial Bank/Attn Bankruptcy  
6111 N River Rd 9th Floor  
Rosemont, IL 60018

Merrick Bank/CardWorks  
Attn: Bankruptcy  
P.O. Box 9201  
Old Bethpage, NY 11804

Meyer Njus & Tanick  
330 Second Avenue South, Suite 350  
Minneapolis, MN 55401

Michael J. Gonda, DDS  
4746 Main St.  
Lisle, IL 60532-1724

Michael Raymond Liss  
Liss & Lamar PC  
1301 W 22Nd St Ste 709  
Oak Brook, IL 60523-2070

Northland Group  
P.O. Box 390905  
Minneapolis, MN 55439

Papa John's  
1008 Solutions Center  
Dept. 771108  
Chicago, IL 60677-1001

PNC Bank  
Attn: BK Dept  
P.O. Box 1820  
Dayton, OH 45401-1820

PNC Mortgage  
Attn: Bankruptcy  
3232 Newmark Drive  
Miamisburg, OH 45342

Pointe Pest Control  
1275 W. Roosevelt Rd., Suite 106  
West Chicago, IL 60185

Precision Heating & Cooling  
12004 S. Central Ave  
Alsip, IL 60803

Radius Global Solutions LLC  
P.O. Box 390905  
Minneapolis, MN 55439

Republic Services  
5050 W. Lake Street  
Melrose Park, IL 60160-2776

Republic Services  
PO Box 9001154  
Louisville, KY 40290-1154

Richard L. Hirsh  
1500 Eisenhower Lane, #800  
Lisle, IL 60532

Robert F. Grgis, DDS  
7350 Janes Ave.  
Woodridge, IL 60517-2339

Sams Club/Synchrony Bank  
P.O. Box 965005  
Orlando, FL 32896-5060

Sams Club/Synchrony Bank  
Attn: Bankruptcy Dept.  
P.O. Box 965060  
Orlando, FL 32896-5060

Stoneleigh Recovery Associates  
P.O. Box 1479  
Lombard, IL 60148-8479

Syncb/PLCC  
Attn: Bankruptcy  
Po Box 965060  
Orlando, FL 32896

Syncb/syncb  
Attn: Bankruptcy  
Po Box 965060  
Orlando, FL 32896

Synchrony Bank  
Attn: BK Dept.  
P.O. Box 965004  
Orlando, FL 32896-5003

Synchrony Bank  
Attn: BK Dept.  
P.O. Box 965004  
Orlando, FL 32896-5004

Synchrony Bank/ JC Penneys  
Attn: Bankruptcy Dept  
P.O. Box 965060  
Orlando, FL 32896

Synchrony Bank/ JC Penneys  
Attn: Bankruptcy Dept  
Po Box 965060  
Orlando, FL 32896

Synchrony Bank/Amazon  
Attn: Bankruptcy Dept  
Po Box 965060  
Orlando, FL 32896

Synchrony Bank/Art Van  
c/o PO Box 965036  
Orlando, FL 32896

Synchrony Bank/Care Credit  
Attn: Bankruptcy Dept  
P.O. Box 965060  
Orlando, FL 32896

Synchrony Bank/Gap  
Attn: Bankruptcy Dept  
P.O. Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/Lowes  
Attn: Bankruptcy Dept  
P.O. Box 965060  
Orlando, FL 32896

Synchrony Bank/PayPal Cr  
Attn: Bankruptcy Dept  
P.O. Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/TJX  
Attn: Bankruptcy Dept  
P.O. Box 965060  
Orlando, FL 32896-5060

Synchrony Bank/Walmart  
Attn: Bankruptcy Dept  
P.O. Box 965060  
Orlando, FL 32896-5060

Target  
Target Card Services  
Mail Stop NCB-0461  
Minneapolis, MN 55440

TD Bank USA NA  
c/o Target Card Services  
P.O. Box 9500  
Minneapolis, MN 55440

U.S. Small Business Administration  
Birmingham Loan Servicing Center  
2 North 20th Street, Ste 320  
Birmingham, AL 35203

United States of America  
Small Business Administration  
500 W. Madison St.  
Chicago, IL 60661-4544

US Bank  
PO BOx 108  
Saint Louis, MO 63166-0108

US Bank/RMS CC  
Attn: Bankruptcy  
P.O. Box 5229  
Cincinnati, OH 45201

US Bank/US Bank Edge  
PO Box 790408  
Saint Louis, MO 63179-0408

Us Dept Of Ed/Great Lakes Higher Educati  
Attn: Bankruptcy  
2401 Interanational Lane  
Madison, WI 53704

Von Maur  
Attn: Bankruptcy  
727 Veterans Memorial Parkway  
Davenport, IA 52806

Von Maur  
Attn: Bankruptcy Dept.  
6565 Brady St.  
Davenport, IA 52806